

## PART 8 - ISSUE FEE TRANSMITTAL

**MAILING INSTRUCTIONS:** This form should be used for transmitting the ISSUE FEE. Blocks 2 through 6 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advanced orders and notification of maintenance fees will be mailed to addressee entered in Block 1 unless you direct otherwise, by: (a) specifying a new correspondence address in Block 3 below; or (b) providing the PTO with a separate "FEE ADDRESS" for maintenance fee notifications with the payment of issue fee or thereafter. See reverse for Certificate of Mailing.

## 1. CORRESPONDENCE ADDRESS

MICHAEL H. SHANAHAN  
WANG LABORATORIES, INC.  
ONE INDUSTRIAL AVENUE, M/S 014-B7D  
LOWELL, MA 01851



## 2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)

INVENTOR'S NAME

Street Address

City, State and ZIP Code

CO-INVENTOR'S NAME

Street Address

City, State and ZIP Code

☐ Check if additional changes are on reverse side

SERIES CODE/SERIAL NO.

FILING DATE

TOTAL CLAIMS

EXAMINER AND GROUP ART UNIT

DATE MAILED

07405792

09/16/91

019

MARCELL M

263

07/26/91

First Named

Applicant

TITLE OF INVENTION

PRIORITY APPARATUS HAVING PROGRAMMABLE MODE Dwell TIME

ATTY'S DOCKET NO.

CLASS-SUBCLASS

BATCH NO.

APPLN. TYPE

SMALL ENTITY

FEE DUE

DATE DUE

DS20131 (2001)

370-085.600

860

UTILITY

NO

\$1050.00

10/23/91

## 3. Further correspondence to be mailed to the following:

Michael H. Shanahan  
Wang Laboratories, Inc.  
One Industrial Avenue, M/S 014-B7D  
Lowell, MA 01851

4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.

1. Michael H. Shanahan  
2. [Blank]  
3. [Blank]

DO NOT USE THIS SPACE

DS20131 09/16/91 07405792

23-0390 020 142

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DS20132 09/16/91 07405792

23-0390 020 501

15.00CH

## 5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)

(1) NAME OF ASSIGNEE:

Wang Laboratories, Inc.

(2) ADDRESS: (City &amp; State or Country)

Lowell, Massachusetts U.S.A.

(3) STATE OF INCORPORATION, IF ASSIGNEE IS A CORPORATION

Massachusetts

☐ This application is NOT assigned.

☒ Assignment previously submitted to the Patent and Trademark Office.

☐ Assignment is being submitted under separate cover. Assignments should be directed to Box ASSIGNMENTS.

**PLEASE NOTE:** Unless an assignee is identified in Block 5, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

## 6a. The following fees are enclosed:

☐ Issue Fee ☐ Advanced Order - # of Copies

## 6b. The following fees should be charged to: (Minimum of 10)

DEPOSIT ACCOUNT NUMBER 23-0390

(Enclose Part C)

☒ Issue Fee ☒ Advanced Order - # of Copies 10 copies

☒ Any Deficiencies in Enclosed Fees (Minimum of 10)

The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above.

(Signature of party in interest of record)

(Date)

Kenneth L. M. [Signature] 9/10/91

NOTE: The Issue Fee will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.

TRANSMIT THIS FORM WITH FEE-CERTIFICATE OF MAILING ON REVERSE

## Certificate of Mailing

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:

Box ISSUE FEE  
Commissioner of Patents and Trademarks  
Washington, D.C. 20231

on September 10, 1991  
(Date)

Kenneth L. Milik  
(Name of person making deposit)

Kenneth L. Milik  
(Signature)

9/10/91  
(Date)

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